

PERMIT APPLICATION

ABOVE GROUND POOL

FBC 2010 - NEC 2008

| Parcel ID# | | |
|------------|--|--|
| | | |

Permit Number

CITY OF DELTONA **BUILDING AND ENFORCEMENT SERVICES** City of Deltona Automated Inspection
System

| aled December | 2345 PROV DELTONA, FL 3 | (386) | (386) 575-6900 / (407) 936-9999 | | | | | |
|---|----------------------------|---------------------------|---------------------------------|--------------------|-------------------------|--|--|--|
| Owner's Name | | Phone () - | | | | | | |
| Project Address – Include C | ity & Zip | | | · | | | | |
| Contractor/Pool Company | | Contractor's Name License | | Phone - | Fax# () - | | | |
| Company Address – Include City & Zip | | | • | È-mail | | | | |
| Electrical Company | Cont | Contractor's Name | | Phone - | Fax# () - | | | |
| Pool Model & Type | | | | | | | | |
| Diameter Height Motor Horse Power | | | | Power | | | | |
| JOB VALUATION \$ Signature of Applicant Date (Contractor's Signature to be notarized) | | | | | | | | |
| STATE OF FLORIDA, COUNTY OF Affirmed and subscribed before me this day of 20 by (type of ID) identification. Signature of Notary Public State of Florida | | | | | | | | |
| Print, Type or Stamp Name of Notary (SEAL) | | | | | | | | |
| The applicant agrees to comply with the Municipal Ordinances and with the conditions of this permit; understands that the issuance of the permit creates no legal liability; express or implied, of the Department, Municipality, Agency or Inspector; and certifies that all of the above information is accurate. Have Permit/Application number and confirmation# when requesting inspections, call 386-575-6900 / 407-936-9999. Inspections will be done the next business day. | | | | | | | | |
| WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT. | | | | | | | | |
| APPROVAL CONDITION revocation of this permit or | | pursuant to the attac | hed conditions. Fai | lure to comply may | result in suspension or | | | |
| PERMIT EXPIRATION: permit expires 180 days from date issued unless otherwise noted below or governed by law. | | | | | | | | |
| PERMIT ISSUED BY MUNICIPAL AGENT DATE | | | | | | | | |